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DECLARATION FOR	Attorney Docket Nur	nber	er SDT 335							
DESIGN		First Named Invento	,	Stephe	en F. Gass					
PATENT APPLI	-	COMPLETE IF KNOWN								
(37 CFR 1.	.63)	Application Number	•							
Declaration	Declaration	Filing Date								
Submitted OR	Submitted after Initial Filing (surcharge	Art Unit				1				
with Initial Filing	(37 CFR 1.16 (e)) required)	Examiner Name				ノ				
As the below named inventor, I hereby declare that:										
My residence, mailing address, and citizenship are as stated below next to my name.										
I believe I am the original and first inve	intor of the subject matter w	hich is claimed and for whi	ich a pat	tent is soug	ht on the invention entitle	;d:				
						1				
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	SAFETY SYSTEMS F	OR POWER EQUIPM	MENT							
L	(Title of the In	- matical				J				
the specification of which	(Title of the In	venuon)								
is attached hereto	·					į				
OR										
was filed on (MM/DD/YYYY)		as United States A	pplicatio	n Number	or PCT International	ĺ				
L.										
Application Number		d on (MM/DD/YYYY)	·							
Application (voltion)	and was alleride	d on (MIMADDATTT)			(if applicable).					
I hereby state that I have reviewed and any amendment specifically referred to	understand the contents of above.	the above identified speci	fication,	including th	ne claims, as amended by	y				
I acknowledge the duty to disclose info applications, material information which international filing date of the continuati	n became available between	patentability as defined in the filing date of the prior	37 CFR applicat	1.56, inclui	ding for continuation-in-pa national or PCT	art				
I hereby claim foreign priority benefits t	under 35 U.S.C. 119(a)-(d)	or (f), or 365(b) of any fore	eign app	lication(s) f	or patent, inventor's or pla	lant				
breeder's rights certificate(s), or 365(a States of America, listed below and ha	 of any PCT international average also identified below. 	application which designa v checking the box, any fo	ted at le prejon a	east one co	ountry other than the Unit or patent, inventor's or ob-	ited lant				
breeder's rights certificate(s), or any fi claimed.	PCT international application	n having a filing date bef	ore that	of the app	plication on which priority	y is				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)		iority Claimed	Certified Copy Attache	d?				
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Additional foreign application nun	nbers are listed on a supple	mental priority data sheet I	PTO/SB	/02B attact	ed hereto:					

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: X Customer Number or Bar Code Label	127630		OR 🗌	Correspondence address below				
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR :	A petition ha	as been file	d for this u	nsigned inventor				
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City Vancouver	State WA	ZIP	98682	Country US				
X Additional inventors are being named on the 5 s		ional Inventor(s) sheet(s) P1	O/SB/02A attached hereto.				

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 5

			7	***********				
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor								
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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 5

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Given Name (first and middle [if any])			Family Name or Surname						
Inventor's Signature							Date		
Residence: City	Stat	e		Country			Citizenship		
Mailing Address									
Mailing Address				,		···- _Y			
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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 5

Name of Additional Joint Inventor, if an	ny:		A petition has been file	d for th	nis unsigned inventor			
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Mailing Address								
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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 4 of 5

Name of Additional Joint Inventor, if an		A petition has been filed for this unsigned inventor							
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Name of Additional Joint Inventor, if ar				A petition has been f		s unsigned inventor			
Given Name (first and middle [if any]))		Family Name or Surname						
Inventor's Signature Date						Date			
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ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>5</u> of <u>5</u>

Name of Additional Joint Inventor, if a	ny:	0	A petition has been t	led for th	is unsigned inventor			
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